# Case 19-12714-JDW Doc 1 Filed 07/08/19 Entered 07/08/19 23:18:56 Desc Main Document Page 1 of 59

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF MISSISSIPPI	_	
Case number (if known)	_ Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this is an amended filing

## Official Form 101

# Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1:	Identify Yourself			
			About Debtor 1:	,	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name			
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.		Tonya First name  Michelle Middle name  Terry  Last name and Suffix (Sr., Jr., II, III)		First name  Middle name  Last name and Suffix (Sr., Jr., II, III)
2.	use Inclu	other names you have d in the last 8 years ude your married or den names.			
3.	you num Indi	y the last 4 digits of r Social Security aber or federal vidual Taxpayer atification number	xxx-xx-0205		

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Debtor 1 Tonya Michelle Terry

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names and **Employer Identification** Numbers (EIN) you have I have not used any business name or EINs. ☐ I have not used any business name or EINs. used in the last 8 years Include trade names and Business name(s) Business name(s) doing business as names EINs EINs If Debtor 2 lives at a different address: Where you live 72 Stratmon Dr Holly Springs, MS 38635 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code Marshall County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it above, fill it in here. Note that the court will send any in here. Note that the court will send any notices to this notices to you at this mailing address. mailing address. Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing Check one: Check one: this district to file for bankruptcy Over the last 180 days before filing this petition, I Over the last 180 days before filing this petition,

- I have lived in this district longer than in any other district.
- I have another reason. Explain. (See 28 U.S.C. § 1408.)

- have lived in this district longer than in any other district.
- I have another reason. Explain. (See 28 U.S.C. § 1408.)

Case number (if known)

		Document	Page 3 01 59	
Debtor 1	Tonya Michelle Terry		3	Case number (if known)

Par	Tell the Court About	our B	ankruptcy Ca	se						
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.								
	choosing to file under	<b>■</b> C	hapter 7							
		□с	hapter 11							
			hapter 12							
			hapter 13							
			·							
8.	How you will pay the fee	•	about how yo	attorney is submitting your p	are paying	the fee yourself, y	ou may pay with cash	r local court for more details n, cashier's check, or money n a credit card or check with		
			I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay							
			J	e <i>in Installments</i> (Official For <b>t my fee be waived</b> (You ma	,	this option only if	you are filing for Char	oter 7. Ry law, a judge may		
		ш	but is not requ	uired to, waive your fee, and	may do so	only if your incor	ne is less than 150% o	of the official poverty line that		
				ır family size and you are un ın to Have the Chapter 7 Filii						
			и о т фриосия		.g . cc		1002) and mon man	you pounou.		
9.	Have you filed for bankruptcy within the last 8 years?	□ No								
	iast o years?	<b>—</b> 16	28.	Northorn District of						
			District	Northern District of Mississippi	When	10/31/12	Case number	12-14643		
			District		— When		Case number			
			District		When		Case number			
10.	Are any bankruptcy cases pending or being	■ No	O							
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	□ Ye	es.							
			Debtor				Relationship to y	/ou		
			District		When		Case number, if	known		
			Debtor				Relationship to y	/ou		
			District		When		Case number, if	known		
11.	Do you rent your	■ No	Go to li	ne 12.						
	residence?	□ Ye	es. Has yo	ur landlord obtained an evict	tion judgm	ent against you?				
				No. Go to line 12.						
				Yes. Fill out <i>Initial Statemer</i> this bankruptcy petition.	nt About ar	n Eviction Judgme	nt Against You (Form	101A) and file it as part of		

Debtor 1 Tonya Michelle Terry

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Case number (if known)

ar	Report About Any Bu	sinesses	You Own	as a Sole Proprie	tor
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to I	Part 4.	
		☐ Yes.	Name	and location of bus	siness
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Numbe	er, Street, City, Sta	te & ZIP Code
	it to this petition.		Check	the appropriate bo	ox to describe your business:
				Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as d	lefined in 11 U.S.C. § 101(53A))
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))
				None of the above	e
If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, from 11 U.S.C. 1116(1)(B).					a small business debtor, you must attach your most recent balance sheet, statement of
	For a definition of small	■ No.	I am n	ot filing under Chap	oter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am fil Code.	11, but I am NOT a small business debtor according to the definition in the Bankruptcy	
		☐ Yes.	I am fil	ing under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.
ar	4: Report if You Own or	Have Any	Hazardo	us Property or An	y Property That Needs Immediate Attention
14.	Do you own or have any	■ No.			
	property that poses or is alleged to pose a threat of imminent and	☐ Yes.	What is t	he hazard?	
	identifiable hazard to public health or safety? Or do you own any				
	property that needs immediate attention?			ate attention is why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	the property?	
					Number, Street, City, State & Zip Code

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Debtor 1 Tonya Michelle Terry

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Document Page 6 of 59 Case number (if known) Debtor 1 **Tonya Michelle Terry Answer These Questions for Reporting Purposes** Part 6: 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10.000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 □ 200-999 How much do you **\$0 - \$50,000** □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** ☐ More than \$50 billion □ \$100,000,001 - \$500 million □ \$500.001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100.000.001 - \$500 million ■ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Tonya Michelle Terry Signature of Debtor 2 Tonya Michelle Terry Signature of Debtor 1 Executed on July 8, 2019 Executed on

MM / DD / YYYY

MM / DD / YYYY

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Debtor 1 Tonya Michelle Terry Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ William L. Fava	Date	July 8, 2019
Signature of Attorney for Debtor	_	MM / DD / YYYY
William L. Fava		
Printed name		
Fava Firm		
Firm name		
P.O. Box 783		
Southaven, MS 38671		
Number, Street, City, State & ZIP Code		
Contact phone <b>662-536-1116</b>	Email address	wfava@favafirm.com
101348 MS		
Bar number & State		

	Case 1	L9-12714-JDW			8/19 23:18:56	6 Des	c Main
Fill	in this informa	ation to identify your	Docume case:	ent Page 8 of 59			
Del	btor 1	Tonya Michelle T	erry				
		First Name	Middle Name	Last Name			
1	btor 2 buse if, filing)	First Name	Middle Name	Last Name			
Uni	ited States Bank	kruptcy Court for the:	NORTHERN DISTRICT	OF MISSISSIPPI			
	se number					_	if this is an
Of	ficial For	m 106Sum					
			and Liabilities ar	nd Certain Statistical I	nformation	_	045
				are filing together, both are equ			2/15 a correct
info	rmation. Fill οι	ıt all of your schedul	les first; then complete th	ne information on this form. If yo	u are filing amende		
you	r originai torm	s, you must fill out a	new Summary and checi	k the box at the top of this page.			
Par	t 1: Summai	rize Your Assets					
						Your as Value o	ssets f what you own
1.	Schedule A/E 1a. Copy line	<b>3: Property</b> (Official F 55, Total real estate, f	orm 106A/B) irom Schedule A/B			\$	105,000.00
	1b. Copy line	62, Total personal pro	perty, from Schedule A/B			\$	36,397.13
	1c. Copy line	63, Total of all propert	y on Schedule A/B			\$	141,397.13
Par	rt 2: Summai	rize Your Liabilities					
							abilities you owe
2.			Claims Secured by Property Imn A, Amount of claim, at	(Official Form 106D) the bottom of the last page of Part	1 of Schedule D	\$	115,266.80
3.			Unsecured Claims (Officia 1 (priority unsecured claim	al Form 106E/F) ns) from line 6e of <i>Schedule E/F</i>		\$	0.00
	3b. Copy the	total claims from Part	2 (nonpriority unsecured c	claims) from line 6j of Schedule E/F	-	\$	27.876.26

Your total liabilities \$

#### Part 4: Answer These Questions for Administrative and Statistical Records

- 6. Are you filing for bankruptcy under Chapters 7, 11, or 13?
  - No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
  - Yes
- 7. What kind of debt do you have?
  - Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
  - Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

143,143.06

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Debtor 1 Tonya Michelle Terry

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

4,380.40

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

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ill in	this information t	o identify	your case and t							
ebto	or 1 <b>Ton</b>	ya Miche	elle Terry							
	First N	lame	Middl	e Name		Last Name				
ebto pouse	e, if filing) First N	lame	Middl	e Name		Last Name				
nite	d States Bankruptcy	Court for	the: NORTHER	RN DIST	RICT OF MIS	SISSIPPI				
220	number								☐ Check if this is a	
									☐ Check if this is a amended filing	
Scł	cial Form 1	B: Pı	roperty	an asset	only once. If a	an asset fits in more than	one category.	list the asset in	12/15 the category where you	
ink it orma	fits best. Be as com ation. If more space i r every question.	plete and a s needed,	accurate as possib attach a separate s	le. If two heet to th	married people his form. On the	e are filing together, both e top of any additional pa vn or Have an Interest In	are equally re-	sponsible for su	pplying correct	
	es. Where is the prop	erty:								
1 7	72 Stratmon Dr			What		? Check all that apply				
_	Street address, if available	, or other des	cription		Duplex or multi-unit building the am Creditor			o not deduct secured claims or exemptions. e amount of any secured claims on <i>Schedu</i> reditors Who Have Claims Secured by Prop		
_	Holly Springs	MS	38635-0000		Land	or mobile home	entire pr		Current value of the portion you own?	
C	City	State	ZIP Code		Investment pro Timeshare	operty		105,000.00	\$105,000.0	
					Other		(such as	s fee simple, ten	our ownership interest ancy by the entireties, o	
				Who		t in the property? Check on	e a life est	tate), if known.		
				_	Debtor 1 only Debtor 2 only					
ľ	Marshall					Debtor 2 only	— Che			
_	Marshall County			Ш				ck if this is com	munity property	
_				☐ Other	At least one of	f the debtors and another ou wish to add about this on number:	(see	instructions)	munity property	

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

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Case number (if known) Document Debtor 1 **Tonya Michelle Terry** 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Do not deduct secured claims or exemptions. Put Acura Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: **TLX** Creditors Who Have Claims Secured by Property. Model: ■ Debtor 1 only 2017 Year: Debtor 2 only Current value of the Current value of the 22,000 Approximate mileage: Debtor 1 and Debtor 2 only entire property? portion you own? Other information: At least one of the debtors and another \$18,522.00 \$18,522.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$18,522.00 pages you have attached for Part 2. Write that number here...... Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware ☐ No Yes. Describe..... Household Furnishings including Kitchen with Small Appliances, \$1,000.00 Dining Room Set, Living Room Set, Bedroom Sets 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games No ☐ Yes. Describe..... 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment

Official Form 106A/B Schedule A/B: Property page 2

■ No

☐ Yes. Describe.....

Debtor 1	Tonya Michel	le Terr	y Doci	IMENT Page 12 of 59 Case number (if known,	
☐ No		thes, fur	s, leather coats, designer	wear, shoes, accessories	
<b>—</b> 163	. Describe				
		Wearin	ng Apparel		\$200.00
■ No		elry, cos	stume jewelry, engageme	nt rings, wedding rings, heirloom jewelry, watches, gems,	gold, silver
Exam ■ No	arm animals  sples: Dogs, cats, bi  Describe	irds, hor	ses		
■ No	ther personal and . Give specific info		•	Iready list, including any health aids you did not list	
				including any entries for pages you have attached	\$1,200.00
Dort 4. D	aasiha Vass Finansi	ial Access	_		
	escribe Your Financi wn or have any le		s quitable interest in any (	of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
■ No	aples: Money you ha			n a safe deposit box, and on hand when you file your peti	·
17. <b>Depo</b> s Exam □ No				certificates of deposit; shares in credit unions, brokerage the same institution, list each.	houses, and other similar
				Institution name:	
		17.1.	Checking Account	Bank of America	\$419.99
		17.2.	Checking Account	Bank of America	\$335.50
		17.3.	Savings Account	Bank of America	\$71.51
		17.4.	Checking Account	Navy Federal Credit Union	\$38.57
_		17.5.	Checking Account	Navy Federal Credit Union	\$582.56

Official Form 106A/B

**Navy Federal Credit Union** 

\$77.00

17.6. Savings Account

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Debtor 1 **Tonya Michelle Terry** 

_		17.7.	Savings Account	Navy Federal Credit Union	\$150.0
18	. <b>Bonds, mutual funds</b> <i>Examples:</i> Bond fund			age firms, money market accounts	
	■ No		Institution or issuer nam		
	☐ Yes		institution of issuer flair	le.	
19	joint venture	stock and	interests in incorporat	ed and unincorporated businesses, including an interest in	an LLC, partnership, an
	■ No  No Give specific i	nformation	about them		
	Tes. Give specific i		me of entity:	% of ownership:	
20	Negotiable instrumen Non-negotiable instru	ts include purents are	personal checks, cashier those you cannot transfe	ole and non-negotiable instruments rs' checks, promissory notes, and money orders. er to someone by signing or delivering them.	
	☐ Yes. Give specific in		uer name:		
21	■ No	n IRA, ERIS	SA, Keogh, 401(k), 403(l	b), thrift savings accounts, or other pension or profit-sharing plar	ns
	☐ Yes. List each acco		ely. of account:	Institution name:	
22	Examples: Agreemer	sed deposit	s you have made so tha	nt you may continue service or use from a company lic utilities (electric, gas, water), telecommunications companies	, or others
	■ No			Institution name or individual:	
	☐ Yes			institution name of individual.	
23	<ul><li>Annuities (A contract</li><li>No</li></ul>	for a perio	dic payment of money to	you, either for life or for a number of years)	
		Issuer nam	e and description.		
24	. <b>Interests in an educa</b> 26 U.S.C. §§ 530(b)(1) ■ No			fied ABLE program, or under a qualified state tuition progra	ım.
		Institution r	name and description. Se	eparately file the records of any interests.11 U.S.C. § 521(c):	
25	. Trusts, equitable or t	future inte	rests in property (other	r than anything listed in line 1), and rights or powers exercis	sable for your benefit
	☐ Yes. Give specific i	nformation	about them		
26				ther intellectual property rom royalties and licensing agreements	
	Yes. Give specific i	nformation	about them		
27	<ul> <li>Licenses, franchises         Examples: Building p         ■ No</li> </ul>			tive association holdings, liquor licenses, professional licenses	
	☐ Yes. Give specific i	nformation	about them		
M	oney or property owed	d to you?			Current value of the portion you own? Do not deduct secured

Official Form 106A/B Schedule A/B: Property page 4

claims or exemptions.

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here......

\$16,675.13

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

37. Do you own or have any legal or equitable interest in any business-related property?

No. Go to Part 6.

☐ Yes. Give specific information..

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Case number (if known) Document Debtor 1 **Tonya Michelle Terry** ☐ Yes. Go to line 38. Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ■ No ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here ...... \$0.00 List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2 \$105,000.00 56. Part 2: Total vehicles, line 5 \$18,522.00 57. Part 3: Total personal and household items, line 15 \$1,200.00 58. Part 4: Total financial assets, line 36 \$16,675.13 Part 5: Total business-related property, line 45 \$0.00 60. Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 61. \$0.00 Total personal property. Add lines 56 through 61... \$36,397.13 Copy personal property total \$36,397.13

Official Form 106A/B Schedule A/B: Property page 6

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$141,397.13

First Name Middle Name Last Name  Debtor 2 (Spouse if, filing) First Name Middle Name Last Name
First Name Middle Name Last Name  Debtor 2 (Spouse if, filing) First Name Middle Name Last Name
Debtor 2 (Spouse if, filing) First Name Middle Name Last Name
(Spouse if, filing) First Name Middle Name Last Name
United States People units of Court for the: NORTHERN DISTRICT OF MISSISSIPPI
United States Bankruptcy Court for the: NORTHERN DISTRICT OF MISSISSIPPI
Case number
(if known)

### Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	Which set of exemp	otions are	you claiming?	Check one only	. even if	vour spouse i	s filina with	vou.
----	--------------------	------------	---------------	----------------	-----------	---------------	---------------	------

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own  Copy the value from Schedule A/B	Amount of the exemption you claim  Specific laws that allow exemption  Check only one box for each exemption.
72 Stratmon Dr Holly Springs, MS 38635 Marshall County Line from <i>Schedule A/B</i> : 1.1	\$105,000.00	\$16,100.00 Miss. Code Ann. § 85-3-21  100% of fair market value, up to any applicable statutory limit
Household Furnishings including Kitchen with Small Appliances, Dining Room Set, Living Room Set, Bedroom Sets Line from Schedule A/B: 6.1	\$1,000.00	\$1,000.00 Miss. Code Ann. § 85-3-1(a)  100% of fair market value, up to any applicable statutory limit
Wearing Apparel Line from Schedule A/B: 11.1	\$200.00	\$200.00 Miss. Code Ann. § 85-3-1(a)  100% of fair market value, up to any applicable statutory limit
Earned Income Tax Credit Line from Schedule A/B: 28.1	\$5,000.00	\$5,000.00 Miss. Code Ann. § 85-3-1(i)  100% of fair market value, up to any applicable statutory limit
Federal Tax Refund Line from Schedule A/B: 28.2	\$5,000.00	\$5,000.00 Miss. Code Ann. § 85-3-1(j)  100% of fair market value, up to any applicable statutory limit

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Debtor 1 Tonya Michelle Terry

Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption you claim Current value of the Curren

Tonya Michelle Terry				
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
State Tax Refund Line from Schedule A/B: 28.3	\$5,000.00		\$5,000.00	Miss. Code Ann. § 85-3-1(k)
Line Ironi Scriedule A/b. 20.3			100% of fair market value, up to any applicable statutory limit	

3.	Are	you claiming	a homestead	exemption of	f more than	\$170,350?

(Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.)

No

☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

☐ Yes

	0000 10 12/14 00 0	Document Page 18	3 of 59	20.10.00 000	o mani
Fill in	this information to identify you				
Debto	r 1 Tonya Michelle	Terry			
	First Name	Middle Name Last Name			
Debto (Spouse		Middle Name Last Name			
United	States Bankruptcy Court for the	: NORTHERN DISTRICT OF MISSISSIPPI			
Case	number				
(if knowr				☐ Check	if this is an
				ameno	led filing
O.(	1. I F 400D				
<u> Uttic</u>	ial Form 106D				
Sch	edule D: Creditors	s Who Have Claims Secured	d by Propert	У	12/15
Be as c	omplete and accurate as possible.	If two married people are filing together, both are eq	ually responsible for su	upplying correct informa	tion. If more space
s need		out, number the entries, and attach it to this form. O			
1. Do ar	ny creditors have claims secured b	y your property?			
	No. Check this box and submit to	this form to the court with your other schedules. Yo	ou have nothing else t	o report on this form.	
	Yes. Fill in all of the information	helow			
	_	20011.			
Part 1			Column A	Column B	Column C
for eacl	h claim. If more than one creditor ha	more than one secured claim, list the creditor separately s a particular claim, list the other creditors in Part 2. As ical order according to the creditor's name.	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion
	Carrington Mortgage				
2.1	Services	Describe the property that secures the claim:	\$88,900.00	\$105,000.00	\$0.00
C	Creditor's Name	72 Stratmon Dr Holly Springs, MS 38635 Marshall County			
	2 O Pov 5004	As of the date you file, the claim is: Check all that			
	P.O. Box 5001 Westfield, IN 46074	apply.			
_	lumber, Street, City, State & Zip Code	☐ Contingent ☐ Unliquidated			
,	number, Street, City, State & Zip Code	☐ Disputed			
Who o	wes the debt? Check one.	Nature of lien. Check all that apply.			
■ Deh	otor 1 only	☐ An agreement you made (such as mortgage or sec	cured		
_	otor 2 only	car loan)			
_	otor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
_	east one of the debtors and another	☐ Judgment lien from a lawsuit			
	eck if this claim relates to a mmunity debt	Other (including a right to offset)			

Date debt was incurred

Last 4 digits of account number

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Debtor 1 Tonya Michelle Te	erry	Case number (if known)			
First Name	Middle Name Last Name				
2.2 Navy Federal Credit Union Creditor's Name	Describe the property that secures the claim:	\$26,366.80	\$18,522.00	\$7,844.80	
Creditor's Name	2017 Acura TLX 22,000 miles				
P.O. Box 3500 Merrifield, VA 22119	As of the date you file, the claim is: Check all that apply.  Contingent				
Number, Street, City, State & Zip C	ode Unliquidated				
Who owes the debt? Check one.	☐ Disputed  Nature of lien. Check all that apply.				
■ Debtor 1 only □ Debtor 2 only	☐ An agreement you made (such as mortgage or car loan)	secured			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)				
At least one of the debtors and a	nother				
☐ Check if this claim relates to a community debt	Other (including a right to offset)				
Date debt was incurred	Last 4 digits of account number				
Add the dollar value of your enti	ries in Column A on this page. Write that number here:	\$115,266.8	0		
If this is the last page of your for	rm, add the dollar value totals from all pages.	\$115,266.8	0		

### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Ou.	30 10 12/14 00 11	Document Page 20 of 59	.0.00 Desc Main
Fill in this int	formation to identify your		
Debtor 1	Tonya Michelle Te	rrv	
	First Name	Middle Name Last Name	
Debtor 2	N		
(Spouse if, filing)	First Name	Middle Name Last Name	
United States	Bankruptcy Court for the:	NORTHERN DISTRICT OF MISSISSIPPI	
Case number			
(if known)			☐ Check if this is an
			amended filing
Official Fo	orm 106E/F		
		ho Have Unsecured Claims	12/15
		Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONP	
Schedule D: Creeft. Attach the name and case	editors Who Have Claims Sec Continuation Page to this pag number (if known).	red Leases (Official Form 106G). Do not include any creditors with partially se ired by Property. If more space is needed, copy the Part you need, fill it out, not e. If you have no information to report in a Part, do not file that Part. On the top	umber the entries in the boxes on the
	et All of Your PRIORITY Un		
_ `	• •	i ciaims against you?	
■ No. Go	to Part 2.		
☐ Yes.			
Part 2: Lis	t All of Your NONPRIORIT	Y Unsecured Claims	
3. Do any cre	editors have nonpriority unsec	ured claims against you?	
☐ No. You	ı have nothing to report in this pa	art. Submit this form to the court with your other schedules.	
Yes.		·	
4 listallofy	our nonnriority unsecured cla	ims in the alphabetical order of the creditor who holds each claim. If a creditor	has more than one nonpriority
unsecured	claim, list the creditor separately	for each claim. For each claim listed, identify what type of claim it is. Do not list clair	ms already included in Part 1. If more
Part 2.	editor noids a particular claim, il	st the other creditors in Part 3.If you have more than three nonpriority unsecured cla	ins illi out the Continuation Page of
			Total claim
	rican Anesthesiology o	Last 4 digits of account number	\$332.80
•	iority Creditor's Name <b>Box 88087</b>	When was the debt incurred?	
	ago, IL 60680		
	er Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who i	ncurred the debt? Check one.		
■ De	btor 1 only	☐ Contingent	
☐ De	btor 2 only	☐ Unliquidated	
☐ De	btor 1 and Debtor 2 only	☐ Disputed	
☐ At	least one of the debtors and and		
	eck if this claim is for a comr		
debt	alaim auhinet ta affact?	Obligations arising out of a separation agreement or divorce that	t you did not
	claim subject to offset?	report as priority claims  ☐ Debts to pension or profit-sharing plans, and other similar debts	
■ No			
☐ Ye	S	Other, Specify Medical Service	

Document Page 21 of 59 Debtor 1 Tonya Michelle Terry ase number (if known) 4.2 \$50.00 American Anesthesiology of TN Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 88087 When was the debt incurred? Chicago, IL 60680 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical Service ☐ Yes 4.3 **American Express** Last 4 digits of account number \$397.81 Nonpriority Creditor's Name P.O. Box 981535 When was the debt incurred? El Paso, TX 79980 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Credit Card** Other. Specify 4.4 **Bank of America** Last 4 digits of account number \$463.72 Nonpriority Creditor's Name P.O. Box 650070 When was the debt incurred? Dallas, TX 75265 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community

debt

■ No

☐ Yes

Is the claim subject to offset?

report as priority claims

■ Other. Specify Credit Card

☐ Obligations arising out of a separation agreement or divorce that you did not

Debts to pension or profit-sharing plans, and other similar debts

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Page 22 of 59 Debtor 1 Tonya Michelle Terry Case number (if known) 4.5 \$214.20 **Baptist** Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 17127 When was the debt incurred? Memphis, TN 38187-0127 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical Service ☐ Yes 4.6 **Baptist** Last 4 digits of account number \$533.78 Nonpriority Creditor's Name P.O. Box 17127 When was the debt incurred? Memphis, TN 38187-0127 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Medical Service** Other. Specify 4.7 Last 4 digits of account number \$757.04 **Baptist** Nonpriority Creditor's Name P.O. Box 17127 When was the debt incurred? Memphis, TN 38187-0127 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

■ Other. Specify Medical Service

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Case number (if known)

Debto	or 1 Tonya Michelle Terry	Case number (if known)	
4.8	Capital One	Last 4 digits of account number	\$423.32
	Nonpriority Creditor's Name P.O. Box 60599	When was the debt incurred?	
	City of Industry, CA 91716  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	Other. Specify Credit Card	
4.9	Consolidated Recovery Systems	Last 4 digits of account number	\$350.85
	Nonpriority Creditor's Name Re: Methodist Healthcare	When was the debt incurred?	
	P.O. Box 1719 Memphis, TN 38101		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other Specify Medical Collection	
44			
4.1 0	Credit One Bank  Nonpriority Creditor's Name	Last 4 digits of account number	\$1,062.69
	P.O. Box 98873	When was the debt incurred?	
	Las Vegas, NV 89193-8873		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Credit card purchases	
		• poon,	

Document Page 24 of 59 Debtor 1 Tonya Michelle Terry ase number (if known) 4.1 **Credit One Bank** \$762.38 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 98873 When was the debt incurred? Las Vegas, NV 89193-8873 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes 4.1 Dillard's \$286.23 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? P.O. Box 660553 Dallas, TX 75266 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes 4.1 **Discover Card** \$1.741.03 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 790213 When was the debt incurred? Saint Louis, MO 63179 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not

■ No
□ Yes

report as priority claims

■ Other. Specify Credit Card

 $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts

Is the claim subject to offset?

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Case number (if known)

DCDI	or Torrya Michelle Terry	Case Hamber (ii known)	
4.1 4	First Heritage Credit	Last 4 digits of account number	\$224.79
•	Nonpriority Creditor's Name	When was the debt incurred?	
	8995 Hwy 51 N Southaven, MS 38671	when was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
	■ No		
	Yes	Other. Specify Loan	
4.1	First Premier Bank		\$615.63
5	Nonpriority Creditor's Name	Last 4 digits of account number	\$015.05
	3820 N Louise Ave	When was the debt incurred?	
	Sioux Falls, SD 57107		
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	Поли	
		Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit Card	
4.1			
6	JC Penney	Last 4 digits of account number	\$422.82
	Nonpriority Creditor's Name P.O. Box 965046	When was the debt incurred?	
	Orlando, FL 32896		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Credit Card	

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Kay Jewelers	Last 4 digits of account number	\$977.62
Nonpriority Creditor's Name P.O. Box 3680	When was the debt incurred?	
Akron, OH 44309-3680	When was the dest mounted:	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Credit Card	
LCA Collections	Last 4 digits of account number	\$82.82
Nonpriority Creditor's Name		<del>402.02</del>
Re: Lab Corp	When was the debt incurred?	
P.O. Box 2240		
Burlington, NC 27216  Number Street City State Zip Code	As of the date you file the claim in Check all that apply	
Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	Пол	
_	Contingent	
Debtor 2 only	Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
<u>•</u>	Debts to pension or profit-sharing plans, and other similar debts	
■ No		
Yes	■ Other. Specify Medical Collection	
Lowe's	Last 4 digits of account number	\$127.35
Nonpriority Creditor's Name		
P.O. Box 965005	When was the debt incurred?	
Orlando, FL 32896  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	The state jet me, the elam ter orion an indiappry	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only		
	☐ Disputed  Type of NONPRIORITY unsecured claim:	
☐ At least one of the debtors and another	Student loans	
☐ Check if this claim is for a community debt	_	
Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
•	☐ Debts to pension or profit-sharing plans, and other similar debts	

☐ Yes

■ Other. Specify Credit Card

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Mariner Finance	Last 4 digits of account number	\$2,
Nonpriority Creditor's Name 1429 Goodman Rd, Suite 19 Horn Lake, MS 38637	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	,	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify Loan	
MCSB, Inc.		\$
Nonpriority Creditor's Name	Last 4 digits of account number	4
Re: Baptist Medical Group P.O. Box 1567 Paris, TN 38242	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt s the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐Yes	■ Other. Specify Medical Collection	
Merrick Bank		\$1.
Nonpriority Creditor's Name	Last 4 digits of account number	Ψ1,
P.O. Box 30537 Fampa, FL 33630	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt s the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐Yes	■ Other. Specify Credit Card	

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Case number (if known)	
Last 4 digits of account number	\$176.19
	<b>4.1.0.1.0</b>
When was the debt incurred?	
= A A A A A A A A A A A A A A A A A A A	
As of the date you file, the claim is: Check all that apply	
☐ Unliquidated	
☐ Disputed	
<del></del>	
☐ Student loans	
Dbligations arising out of a separation agreement or divorce that you did not report as priority claims	
☐ Debts to pension or profit-sharing plans, and other similar debts	
■ Other. Specify Medical Service	
	\$136.19
Last 4 digits of account number	\$130.19
When was the debt incurred?	
As of the date you file, the claim is: Check all that apply	
☐ Contingent	
☐ Unliquidated	
☐ Disputed	
Type of NONPRIORITY unsecured claim:	
☐ Student loans	
☐ Obligations arising out of a separation agreement or divorce that you did not	
report as priority claims	
$\square$ Debts to pension or profit-sharing plans, and other similar debts	
Other. Specify Medical Service	
	\$181.14
Last 4 digits of account number	Ψίσι.ιτ
When was the debt incurred?	
As of the date you file, the claim is: Check all that apply	
☐ Contingent	
☐ Unliquidated	
☐ Disputed	
Type of NONPRIORITY unsecured claim:	
☐ Student loans	
☐ Obligations arising out of a separation agreement or divorce that you did not	
report as priority claims	
Debte to pension or profit charing plans, and other similar debte	
Debts to pension of profit-straining plans, and other similar debts	
	As of the date you file, the claim is: Check all that apply  Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Other. Specify Medical Service  Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply  Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Other. Specify Medical Service  Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent Other. Specify Medical Service  Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims or profit-sharing plans, and other similar debts

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Debio	Tonya Michelle Terry	Case number (if known)	
4.2	Navy Federal Credit Union	Last 4 digits of account number	\$987.00
<u>[0</u>	Nonpriority Creditor's Name P.O. Box 3500	When was the debt incurred?	·
	Merrifield, VA 22119  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	, , , , , , , , , , , , , , , , , , , ,	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Credit Card	
4.2	One Main Financial	Last 4 digits of account number	\$3,500.00
	Nonpriority Creditor's Name 8230 Camp Creek Blvd, Suite 105	When was the debt incurred?	· ,
	Olive Branch, MS 38654  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	,	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims  ☐ Debts to pension or profit-sharing plans, and other similar debts	
	■ No □ Yes	_	
	Li res	Other. Specify Loan	
4.2	Path Group of the Mid-South	Last 4 digits of account number	\$270.00
	Nonpriority Creditor's Name 7550 Wolf River Blvd, Suite 200	When was the debt incurred?	
	Germantown, TN 38138		
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Medical Service	

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Case number (if known)

DCDIO	Tonya wiichene Terry	Odde Humber (II known)	
4.2	Pay Pal Credit	Last 4 digits of account number	\$1,018.00
	Nonpriority Creditor's Name P.O. Box 71202 Charlette NC 38272	When was the debt incurred?	
	Charlotte, NC 28272  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	on an analysis and an analysis	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Credit Card	
4.3	Republic Bank & Trust Company	Last 4 digits of account number	\$2,100.00
	Nonpriority Creditor's Name d/b/a Elastic	When was the debt incurred?	
	P.O. Box 950276	When was the debt incurred:	
	Louisville, KY 40295-0276		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Personal Loan	
4.3	Revenue Assurance	Last 4 digits of account number	\$366.75
1	Nonpriority Creditor's Name	Last 4 digits of account number	Ψοσοσ
	Re: Methodist Healthcare	When was the debt incurred?	
	2650 Thousand Oaks Blvd, Ste 4220		
	Memphis, TN 38118  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the dam is. Oneok an that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
		Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	∏ Yes	Other Specify Medical Collection	

Debto	Tonya Michelle Terry	Document Page 31 of 59 Case number (if known)	
4.3	Semmes-Murphey Clinic	Last 4 digits of account number	\$160.14
	Nonpriority Creditor's Name P.O. Box 1000, Dpt. 575 Memphis, TN 38148-0001	When was the debt incurred?	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical Service	
4.3	Semmes-Murphey Clinic	Last 4 digits of account number	\$630.08
	Nonpriority Creditor's Name P.O. Box 1000, Dpt. 575 Memphis, TN 38148-0001	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	$\square$ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical Service	
4.3	Synchrony Bank/Ashley Furniture	Last 4 digits of account number	\$2,767.19
	Nonpriority Creditor's Name P.O. Box 960061 Orlando, FL 32896	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	

☐ Yes

■ Other. Specify Credit Card

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Case number (if known)

Target Card Services	Last 4 digits of account number	\$234.58
Nonpriority Creditor's Name P.O. Box 673	When was the debt incurred?	
Minneapolis, MN 55440  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Credit Card	
Victoria's Secret	Last 4 digits of account number	\$197.65
Nonpriority Creditor's Name P.O. Box 659728	When was the debt incurred?	********
San Antonio, TX 78265		
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Credit Card	
Wakefield & Associates	Last 4 digits of account number	\$273.75
Nonpriority Creditor's Name Re: Path Group of the Mid South	When was the debt incurred?	
P.O. Box 59003 Knoxville, TN 37950		
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	Пол	
	☐ Contingent	
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecured claim:	
☐ At least one of the debtors and another ☐ Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
<b>—</b> NO		

Case 19-12714-JDW Doc 1 Filed 07/08/19 Entered 07/08/19 23:18:56 Desc Main Document Page 33 of 59 Debtor 1 Tonya Michelle Terry ase number (if known) 4.3 Wakefield & Associates \$270.45 Last 4 digits of account number 8 Nonpriority Creditor's Name When was the debt incurred? Re: Path Group of the Mid South P.O. Box 59003 Knoxville, TN 37950 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical Collection ☐ Yes 4.3 Wal-Mart/SYNCB \$426.00 Last 4 digits of account number 9 Nonpriority Creditor's Name P.O. Box 530927 When was the debt incurred? Atlanta, GA 30353 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Part 4: Add the Amounts for Each Type of Unsecured Claim type of unsecured claim.

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each

					Total Claim
T. (.)	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
					Total Claim
	6f.	Student loans	6f.	\$	0.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that	6~	¢.	0.00
		you did not report as priority claims	6g.	\$	0.00

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Debtor 1 **Tonya Michelle Terry** 

6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 27,876.26
6i.	Total Nonpriority. Add lines 6f through 6i.	6i.	\$ 27 876 26

		13(8:11118:	111 11111 1111 1111 1111	
Fill in this infor	mation to identify your	case:		
Debtor 1	Tonya Michelle T	erry		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF MISSISSIPPI	
Case number (if known)				☐ Check if this is an
				amended filing

## Official Form 106G

# **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company wit Name, Numb	h whom you have the c er, Street, City, State and ZIP Co	ontract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	=
2.3					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.4					
	Name				_
	Number	Street			
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	<del>-</del>
	-,				

		Docume	nt Page 36 d	of 59
Fill in this ir	nformation to identify your	case:		
Debtor 1	Tonya Michelle T	erry		
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
United State	s Bankruptcy Court for the:	NORTHERN DISTRICT	OF MISSISSIPPI	
Case numbe	er			
(if known)				☐ Check if this is an amended filing
Official	Form 106H			
	ıle H: Your Cod	ebtors		12/15
1. Do yo ■ No □ Yes 2. Within	nd case number (if known) ou have any codebtors? (If	Answer every question.  you are filing a joint case, d  u lived in a community pro	o not list either spouse	<b>y?</b> (Community property states and territories include
Yes. I	again as a codebtor only i 06D), Schedule E/F (Officia	ors. Do not include your of that person is a guarant	spouse as a codebtor or or cosigner. Make	if your spouse is filing with you. List the person shown sure you have listed the creditor on Schedule D (Official 16G). Use Schedule D, Schedule E/F, or Schedule G to fill
				Out and O. The sear Plant and an arrange and the debt
	olumn 1: Your codebtor me, Number, Street, City, State and Z	IP Code		Column 2: The creditor to whom you owe the debt Check all schedules that apply:
2.1				Cahadula D. lina
3.1 Na	ime			
Nu Cit	imber Street	State	ZIP Code	_
3.2				☐ Schedule D, line
	ime			☐ Schedule E/F, line ☐ Schedule G, line ☐
	imber Street	Chata	710.0-4-	_
Cit	ty	State	ZIP Code	

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Fill	in this information	to identify your ca	ace.								
	btor 1	Tonya Miche									
	btor 2 buse, if filing)					_					
Uni	ited States Bankrup	otcy Court for the	NORTHERN DISTRIC	CT OF MISSISSIPPI							
(If kr	se number	4001						nded emen	ıt showinç	g postpetition	
	fficial Form						MM / D	D/ YY	ΥY		
	chedule I:				<b></b>						12/15
sup spo atta	plying correct info use. If you are se ch a separate she	ormation. If you parated and you	sible. If two married peo are married and not filin r spouse is not filing wi On the top of any addition	ng jointly, and your spith you, do not include	ouse i infori	is livino mation	g with you, i about your	nclud spou	de inform ise. If mo	nation about ore space is	your needed,
1.	Fill in your emp information.	loyment		Debtor 1			Debt	or 2 d	or non-fil	ling spouse	
		have more than one job,			■ Employed			☐ Employed			
	attach a separate information about		Linployment status	☐ Not employed			☐ Not employed				
	employers.		Occupation	HR/Benefits Spec	ialist						
	Include part-time self-employed wo		Employer's name	Institute of Comn Services	nunity	•					
	Occupation may or homemaker, if		Employer's address	160 West Valley A		35					
			How long employed to	here? 10 Years							
Par	rt 2: Give De	etails About Mon	thly Income								
	mate monthly inc		ate you file this form. If y	you have nothing to rep	ort for	any line	e, write \$0 in	the s	pace. Inc	clude your no	n-filing
	ou or your non-filing e space, attach a s		ore than one employer, co	ombine the information	for all e	employe	ers for that po	erson	on the lir	nes below. If	you need
						F	or Debtor 1			otor 2 or ng spouse	
2.			ry, and commissions (be calculate what the monthl		2.	\$	3,910.4	9	\$	N/A	
3.	Estimate and lis	st monthly overti	me pay.		3.	+\$	0.0	0	+\$	N/A	-
4.	Calculate gross	Income. Add lin	ne 2 + line 3.		4.	\$	3,910.49		\$	N/A	

Official Form 106I Schedule I: Your Income page 1

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Deb	tor 1	Tonya Michelle Terry		C	Case number (if kn	own)				
					For Debtor 1			Debtor -filing s		
	Cop	y line 4 here	4.	-	\$ 3,910	.49	\$		N/A	_
_	1 :-4									_
5.		all payroll deductions:	_		•		•			
	5a.	Tax, Medicare, and Social Security deductions	5a		\$ 579		\$_		N/A	_
	5b. 5c.	Mandatory contributions for retirement plans	5b			.00	\$_ \$		N/A	_
	5d.	Voluntary contributions for retirement plans Required repayments of retirement fund loans	5d 5d			.00	\$ _		N/A N/A	
	5e.	Insurance	5e		\$ 346		\$ -		N/A	_
	5f.	Domestic support obligations	5f.			.00	\$_		N/A	_
	5g.	Union dues	5g		·	.00	\$		N/A	_
	5h.	Other deductions. Specify:	5h	1.+		.00	+ \$_		N/A	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$ 1,083	.05	\$		N/A	_
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$ 2,827	.44	\$_		N/A	<u> </u>
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a	a.	\$ 0	.00	\$		N/A	
	8b.	Interest and dividends	8b	).	\$ 0	.00	\$		N/A	<del>-</del>
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c	<b>)</b> .		.00	\$		N/A	
	8d.	Unemployment compensation	8d	d.		.00	\$		N/A	
	8e.	Social Security	8e	€.	\$0	.00	\$		N/A	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	8f.			.00	\$		N/A	_
	8g.	Pension or retirement income	8g			.00	\$		N/A	_
	8h.	Other monthly income. Specify:	_ 8h	1.+	\$0	.00	+ \$_		N/A	<u>-</u>
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$		.00	\$_		N/	A
10	Cal	sulate monthly income. Add line 7 , line 0	10.	\$	2 227 44	+ \$		NI/A	_ 6	2 027 44
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	Ψ_	2,827.44	+ \$_		N/A	= \$ _	2,827.44
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your refriends or relatives. Not include any amounts already included in lines 2-10 or amounts that are not accify:	depe				•		e J. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies						12.	\$	2,827.44
10	D		2							ned ly income
13.	Do :	ou expect an increase or decrease within the year after you file this form	ſ							
	_	No. Yes Eynlain								

Fill	in this information to identify your case:		I		
	otor 1 Tonya Michelle Terry		Chec	k if this is:	
	Tonya mionene Terry			An amended filing	
	ouse, if filing)			A supplement shown a supplement shown a supplement shown a supplement shown as of the supplement shown as a su	ving postpetition chapter the following date:
Unit	ted States Bankruptcy Court for the: NORTHERN DISTRICT OF MISS	SISSIPPI	_	MM / DD / YYYY	
Cas	se number				
1	nown)				
O	fficial Form 106J				
	chedule J: Your Expenses				12/15
Be info	as complete and accurate as possible. If two married people a prmation. If more space is needed, attach another sheet to this mber (if known). Answer every question.	re filing together, be form. On the top of	oth are equa f any additio	ally responsible fonds anal pages, write y	or supplying correct your name and case
	t 1: Describe Your Household				
1.	Is this a joint case?				
	■ No. Go to line 2.  ☐ Yes. Does Debtor 2 live in a separate household?				
	□ No				
	☐ Yes. Debtor 2 must file Official Form 106J-2, Expense:	s for Separate House	ehold of Debt	or 2.	
2.	Do you have dependents? $\square$ No				
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state the				□ No
	dependents names.	Daughter		12	■ Yes
					□ No □ Yes
					□ No
					☐ Yes
					□ No
3.	Do your expenses include ■ No				☐ Yes
0.	expenses of people other than				
	yourself and your dependents?				
exp	t 2: Estimate Your Ongoing Monthly Expenses timate your expenses as of your bankruptcy filing date unless to be seen as of a date after the bankruptcy is filed. If this is a supplicable date.				
	lude expenses paid for with non-cash government assistance value of such assistance and have included it on Schedule I:				
	ficial Form 106I.)	rour meome		Your exp	enses
4.	The rental or home ownership expenses for your residence. payments and any rent for the ground or lot.	Include first mortgag	e 4. \$		684.08
	If not included in line 4:				
	4a. Real estate taxes		4a. \$		0.00
	4b. Property, homeowner's, or renter's insurance		4b. \$		0.00
	<ul><li>4c. Home maintenance, repair, and upkeep expenses</li><li>4d. Homeowner's association or condominium dues</li></ul>		4c. \$ 4d. \$		0.00 0.00
5.	Additional mortgage payments for your residence, such as he	ome equity loans	5. \$		0.00

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Deptor 1 10	nya Michelle Terry	Case num	ber (if known)	
6. Utilities:				
	ctricity, heat, natural gas	6a.	\$	275.00
	ter, sewer, garbage collection	6b.		0.00
	ephone, cell phone, Internet, satellite, and cable services	6c.		189.00
	er. Specify:	6d.	\$	0.00
	I housekeeping supplies	7.	\$	400.00
	e and children's education costs	8.	\$	0.00
	laundry, and dry cleaning	9.	\$	25.00
_	care products and services	10.	\$	
	rand dental expenses		:	100.00
	•	11.	Φ	211.00
	tation. Include gas, maintenance, bus or train fare.	12.	\$	110.00
	ment, clubs, recreation, newspapers, magazines, and books	13.	\$	25.00
	e contributions and religious donations	14.	\$	100.00
5. <b>Insuranc</b> e	•	14.	Ψ	100.00
	clude insurance deducted from your pay or included in lines 4 or 20.			
	insurance	15a.	\$	67.00
	alth insurance	15a.		0.00
	nicle insurance	15b.	·	130.00
	er insurance. Specify:	15d.		0.00
	o not include taxes deducted from your pay or included in lines 4 or 20.	13u.	Ψ	0.00
Specify:	o not include taxes deducted from your pay or included in lines 4 or 20.	16.	\$	0.00
	nt or lease payments:		•	
17a. Car	payments for Vehicle 1	17a.	\$	507.00
17b. Car	payments for Vehicle 2	17b.	\$	0.00
17c. Oth	er. Specify:	17c.	\$	0.00
17d. Oth	er. Specify:	17d.	\$	0.00
	ments of alimony, maintenance, and support that you did not report		\$	0.00
	I from your pay on line 5, Schedule I, Your Income (Official Form 106	1).	·	
	yments you make to support others who do not live with you.	19.	\$	0.00
Specify: 0. Other rea	Il property expenses not included in lines 4 or 5 of this form or on So		ur Incomo	
	rtgages on other property	20a.		0.00
	al estate taxes	20b.		
		20b. 20c.		0.00
	perty, homeowner's, or renter's insurance			0.00
	intenance, repair, and upkeep expenses	20d.	·	0.00
	meowner's association or condominium dues	20e.		0.00
1. Other: Sp	pecify:	21.	+\$	0.00
	your monthly expenses			
22a. Add	lines 4 through 21.		\$	2,823.08
22b. Copy	line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-	2	\$	
	line 22a and 22b. The result is your monthly expenses.		\$	2,823.08
	, , ,			2,020.00
	s your monthly net income.	00-	œ.	0.007.44
	by line 12 (your combined monthly income) from Schedule I.	23a.	· -	2,827.44
23b. Cop	by your monthly expenses from line 22c above.	23b.	-\$	2,823.08
23c. Sub	otract your monthly expenses from your monthly income.			4.00
	e result is your monthly net income.	23c.	\$	4.36
24. Do vou ex	xpect an increase or decrease in your expenses within the year after	vou file this	form?	
For exampl	le, do you expect to finish paying for your car loan within the year or do you expect y			ase or decrease because of a
modification	n to the terms of your mortgage?			
■ No.				
☐ Yes.	Explain here:			

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Debtor 1					
305101 1	Tonya Michelle Michel		Loot Name		
Debtor 2	First Name	Middle Name	Last Name		
Spouse if, filing)	First Name	Middle Name	Last Name		
Inited States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	COF MISSISSIPPI		
ase number					
f known)					Check if this is an amended filing
	m 106Dec				
eclarat	tion About a	ın Individual	Debtor's Sc	hedules	12/1
Sig	ın Below				
		one who is NOT an atto	rney to help you fill out ba	ankruptcy forms?	
		one who is NOT an atto	rney to help you fill out ba	ankruptcy forms?	
Did you pa		one who is NOT an atto	rney to help you fill out ba	Attach <i>Bankru</i> ,	otcy Petition Preparer's Notice nd Signature (Official Form 119
Did you pa	ay or agree to pay some		rney to help you fill out ba	Attach Bankru Declaration, au	nd Signature (Official Form 119
Did you pa	Name of person  alty of perjury, I declare re true and correct.			Attach Bankru Declaration, au	nd Signature (Official Form 119
Did you pa  No Yes.  Under penathat they ar  X /s/ Tor Tonya	Name of person  alty of perjury, I declare		nmary and schedules filed	Attach Bankru, Declaration, all	nd Signature (Official Form 119

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<b>5</b> 111 5	n this inform	nation to identify you	r caso:			
Debt	IOI I	Tonya Michelle First Name	Middle Name	Last Name		
Debt (Spou	tor 2 se if, filing)	First Name	Middle Name	Last Name		
Unite	ed States Bar	nkruptcy Court for the:	NORTHERN DISTRICT (	OF MISSISSIPPI		
Case (if kno	e number				_	Check if this is an mended filing
Sta Be as	s complete a	of Financial	attach a separate sheet to	are filing together, both are	ankruptcy equally responsible for sup additional pages, write you	
Part	1: Give D	etails About Your Ma	arital Status and Where You	Lived Before		
1.	What is your	current marital statu	ıs?			
	☐ Married ■ Not mar	ried				
2.	During the la	ast 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. Lis	t all of the places you l	ived in the last 3 years. Do no	ot include where you live now	<i>'</i> .	
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
	s and territori				ity property state or territor co, Texas, Washington and W	
	■ No □ Yes. Ma	ke sure you fill out <i>Scl</i>	nedule H: Your Codebtors (O	fficial Form 106H).		
Part	2 Explai	n the Sources of You	r Income			
-	Fill in the tota	I amount of income yo	nployment or from operatin u received from all jobs and a have income that you receiv	all businesses, including part-		ndar years?
	□ No ■ Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$26,282.40	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

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Debtor 1 Tonya Michelle Terry

		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
For last calendar year: (January 1 to December 31, 2018)		■ Wages, commissions, bonuses, tips			
		☐ Operating a business		☐ Operating a business	
	dar year before that: December 31, 2017)	■ Wages, commissions, bonuses, tips	\$42,763.00	☐ Wages, commissions, bonuses, tips	
		☐ Operating a business		☐ Operating a business	
and other winnings.  List each :	public benefit payment If you are filing a joint o	ether that income is taxable. Exa s; pensions; rental income; inter ase and you have income that y come from each source separal	rest; dividends; money collect you received together, list it o	ed from lawsuits; royalties; an nly once under Debtor 1.	
		Debtor 1		Debtor 2	
		Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)
Part 3: Lis	Certain Payments Yo	ou Made Before You Filed for	Bankruptcy		
Lio.					
	Neither Debtor 1 nor individual primarily for During the 90 days be ☐ No. Go to line ☐ Yes List below paid that not include.	2's debts primarily consumer Debtor 2 has primarily consumer a personal, family, or household of the polymer of the primarily consumer apersonal, family, or household of the polymer is a family of the payments to an attorney for the polymer of the polymer is a polymer in the polymer in the polymer is a polymer in the polym	Imer debts. Consumer debts id purpose."  d you pay any creditor a total d a total of \$6,825* or more in the for domestic support obligations bankruptcy case.	of \$6,825* or more?  n one or more payments and the ations, such as child support a	he total amount you and alimony. Also, do
6. Are eithe □ No.	Neither Debtor 1 nor individual primarily for individual primarily for During the 90 days be □ No. Go to line □ Yes List below paid that not include * Subject to adjustme.  Debtor 1 or Debtor 2	Debtor 2 has primarily consumer a personal, family, or household before you filed for bankruptcy, die 7.  If yeach creditor to whom you paid creditor. Do not include payment be payments to an attorney for the	Imer debts. Consumer debts id purpose."  d you pay any creditor a total d a total of \$6,825* or more in the for domestic support obligations bankruptcy case. Is after that for cases filed on the imer debts.	of \$6,825* or more?  n one or more payments and the ations, such as child support a corrupt after the date of adjustment.	he total amount you and alimony. Also, do
6. Are eithe □ No.	Neither Debtor 1 nor individual primarily for individual primarily for During the 90 days be □ No. Go to line □ Yes List below paid that not include * Subject to adjustme.  Debtor 1 or Debtor 2	Debtor 2 has primarily consult a personal, family, or household a personal, family, or household a fore you filed for bankruptcy, die 7.  If yeach creditor to whom you paid creditor. Do not include paymented be payments to an attorney for the payments to an attorney for the payments on 4/01/22 and every 3 years or both have primarily consulting you filed for bankruptcy, die present a person of the payments of t	Imer debts. Consumer debts id purpose."  d you pay any creditor a total d a total of \$6,825* or more in the for domestic support obligations bankruptcy case. Is after that for cases filed on the imer debts.	of \$6,825* or more?  n one or more payments and the ations, such as child support a corrupt after the date of adjustment.	he total amount you and alimony. Also, do

paid

still owe

Case 19-12714-JDW Doc 1 Filed 07/08/19 Entered 07/08/19 23:18:56 Page 44 of 59 Document ase number (*if known*) Debtor 1 Tonya Michelle Terry Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider. **Insider's Name and Address Dates of payment** Total amount Amount you Reason for this payment still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an 8. insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider Insider's Name and Address Total amount Amount you Reason for this payment Dates of payment still owe Include creditor's name paid Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. Nο ☐ Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11.

Yes. Fill in the information below.

**Creditor Name and Address Describe the Property** Date Value of the property **Explain what happened** 

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

Nο

Yes. Fill in the details.

**Creditor Name and Address** Describe the action the creditor took Date action was Amount

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

No

☐ Yes

Part 5: List Certain Gifts and Contributions

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

Yes. Fill in the details for each gift.

Gifts with a total value of more than \$600 per person

Describe the gifts

Dates you gave the gifts

Value

Person to Whom You Gave the Gift and Address:

Official Form 107

Case 19-12714-JDW Doc 1 Filed 07/08/19 Entered 07/08/19 23:18:56 Desc Main Page 45 of 59 Case number (if known) Document Debtor 1 Tonya Michelle Terry 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed **Charity's Name** Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Yes. Fill in the details. Person Who Was Paid Amount of Description and value of any property Date payment Address transferred or transfer was payment **Email or website address** made Person Who Made the Payment, if Not You Abacus Credit Counseling **Credit Counseling** \$25.00 15760 Ventura Boulevard, Suite 700 Encino, CA 91436 Fava Firm Attorney's Fees 7/8/2019 \$1,165.00 P.O. Box 783 Southaven, MS 38671 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. Nο Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of Address transferred or transfer was payment made 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

Yes. Fill in the details.

Person Who Received Transfer **Address** 

Person's relationship to you

Description and value of property transferred

Describe any property or payments received or debts paid in exchange

Date transfer was made

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Case number (if known) Document

Debtor 1 Tonya Michelle Terry

19.	<ul> <li>Within 10 years before you filed for bankrupto beneficiary? (These are often called asset-prote</li> <li>No</li> <li>Yes. Fill in the details.</li> </ul>		y property to a self-se	ettled trust or similar device	of which you are a
	Name of trust	Description and v	alue of the property to	ransferred	Date Transfer was made
Pa	rt 8: List of Certain Financial Accounts, Instr	ruments, Safe Deposit	Boxes, and Storage	Units	
20.	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associated No Yes. Fill in the details.	other financial accour	nts; certificates of dep		
		ast 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 yearsh, or other valuables?  No Yes. Fill in the details.	ar before you filed for	bankruptcy, any safe	deposit box or other depos	itory for securities,
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		ibe the contents	Do you still have it?
22.	Have you stored property in a storage unit or  ■ No □ Yes. Fill in the details.	place other than your	home within 1 year b	efore you filed for bankrupto	cy?
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S State and ZIP Code)		ibe the contents	Do you still have it?
Pa	rt 9: Identify Property You Hold or Control fo	or Someone Else			
23.	Do you hold or control any property that some for someone.  No Yes. Fill in the details.	eone else owns? Inclu	ude any property you	borrowed from, are storing f	or, or hold in trust
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		ibe the property	Value
	rt 10: Give Details About Environmental Information the purpose of Part 10, the following definition				
	Environmental law means any federal, state, of toxic substances, wastes, or material into the regulations controlling the cleanup of these s	air, land, soil, surface	e water, groundwater,		
	Site means any location, facility, or property a to own, operate, or utilize it, including dispose	as defined under any e		nether you now own, operate	e, or utilize it or used

Official Form 107

Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

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Debtor 1 Tonya Michelle Terry

24.	Has any governmental unit notified you that	you may be liable or potentially liable	under or in violation of an environme	ental law?
	Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of a	nny release of hazardous material?		
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
26.	Have you been a party in any judicial or admi	inistrative proceeding under any envi	ronmental law? Include settlements a	and orders.
	■ No □ Yes. Fill in the details.			
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case
Par	111: Give Details About Your Business or C	connections to Any Business		
27.	Within 4 years before you filed for bankrupto	y, did you own a business or have an	y of the following connections to any	business?
	☐ A sole proprietor or self-employed in	a trade, profession, or other activity,	either full-time or part-time	
	☐ A member of a limited liability compa	ny (LLC) or limited liability partnersh	ip (LLP)	
	☐ A partner in a partnership			
	☐ An officer, director, or managing exe	cutive of a corporation		
	☐ An owner of at least 5% of the voting	or equity securities of a corporation		
	■ No. None of the above applies. Go to Pa	art 12.		
	☐ Yes. Check all that apply above and fill i	n the details below for each business	<b>5.</b>	
	Business Name Address	Describe the nature of the business	Employer Identification number Do not include Social Security in	
		Name of accountant or bookkeeper	Dates business existed	
28.	Within 2 years before you filed for bankruptc institutions, creditors, or other parties.	y, did you give a financial statement t	to anyone about your business? Inclu	de all financial
	■ No			
	Yes. Fill in the details below.			
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued		

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Case number (if known)

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

■ No

Yes. Name of Person \_\_\_\_\_. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this info	rmation to identify your	case:		
Debtor 1	Tonya Michelle To			
	First Name	Middle Name	Last Name	_
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	_
United States B	ankruptcy Court for the:	NORTHERN DIS	TRICT OF MISSISSIPPI	_
Case number				
(if known)				☐ Check if this is an amended filing
			viduals Filing Under Cha	apter 7 12/15
	ve claims secured by yo		out this form it.	
You must file the which on the lf two married pusing a	ever is earlier, unless the form e form people are filing together and date the form.	rithin 30 days after se court extends th r in a joint case, bo	you file your bankruptcy petition or by the ce time for cause. You must also send copies of the are equally responsible for supplying cores needed, attach a separate sheet to this for	s to the creditors and lessors you list rect information. Both debtors must
write y	your name and case nur	nber (if known).	s needed, attach a separate sheet to this for	ii. On the top of any additional pages,
•	•	art 1 of Schedule D	: Creditors Who Have Claims Secured by Pr	operty (Official Form 106D), fill in the
information be Identify the c	reditor and the property t	hat is collateral	What do you intend to do with the proper secures a debt?	ty that Did you claim the property as exempt on Schedule C?
Creditor's (	Carrington Mortgage	Services	☐ Surrender the property. ☐ Retain the property and redeem it.	□No
Description o	f 72 Stratmon Dr Ho	Illy Springs	■ Retain the property and enter into a	■ Yes
property securing deb	MS 38635 Marsha		Reaffirmation Agreement.  Retain the property and [explain]:	
Creditor's	Navy Federal Credit U	Inion	☐ Surrender the property.	□No
name:			☐ Retain the property and redeem it.	<b>-</b>
Description o	f 2017 Acura TLX 22	2,000 miles	Retain the property and enter into a Reaffirmation Agreement.	■ Yes

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

☐ Retain the property and [explain]:

Describe your unexpired personal property leases

Will the lease be assumed?

Official Form 108

property

securing debt:

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Debtor 1 Tonya Michelle Terry	Case number (if known)
Lessor's name: Description of leased Property:	□ No
Lessor's name: Description of leased Property:	□ No
Lessor's name: Description of leased Property:	□ No
Lessor's name: Description of leased Property:	□ No
Lessor's name: Description of leased Property:	□ No
Lessor's name: Description of leased Property:	□ No
Lessor's name: Description of leased Property:	□ No
Part 3: Sign Below  Under penalty of perjury, I declare that I have indicated my intention about an	y property of my estate that secures a debt and any personal
x /s/ Tonya Michelle Terry X	pnature of Debtor 2
Tonya Michelle Terry Signature of Debtor 1	juature di Debidi 2
Date July 8, 2019 Date	

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter	7:	Liquidation
\$	245	filing fee
;	\$75	administrative fee
<u>+</u>	\$15	trustee surcharge
\$	335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure</a>.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 19-12714-JDW Doc 1 Filed 07/08/19 Entered 07/08/19 23:18:56 Desc Main Document Page 55 of 59

B2030 (Form 2030) (12/15)

### United States Bankruptcy Court Northern District of Mississippi

In re	Tonya Michelle Terry		Case No.		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPE	NSATION OF ATTOR	NEY FOR DI	EBTOR(S)	
(	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016 compensation paid to me within one year before the filinger rendered on behalf of the debtor(s) in contemplation of	ng of the petition in bankruptcy, o	or agreed to be paid	to me, for services ren	dered or to
	For legal services, I have agreed to accept			1,165.00	
	Prior to the filing of this statement I have received.		\$	1,165.00	
	Balance Due		\$	0.00	
2. ′	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3. ′	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	I have not agreed to share the above-disclosed comp	pensation with any other person u	nless they are mem	bers and associates of 1	my law firm.
	☐ I have agreed to share the above-disclosed compensation of the agreement, together with a list of the national control of the state				w firm. A
5.	In return for the above-disclosed fee, I have agreed to re	ender legal service for all aspects	of the bankruptcy	ease, including:	
1	<ul> <li>Analysis of the debtor's financial situation, and render</li> <li>Preparation and filing of any petition, schedules, state</li> <li>Representation of the debtor at the meeting of credite</li> <li>[Other provisions as needed]</li> <li>Negotiations with secured creditors to reaffirmation agreements and application</li> <li>522(f)(2)(A) for avoidance of liens on ho</li> </ul>	ement of affairs and plan which it ors and confirmation hearing, and reduce to market value; exer ons as needed; preparation a	may be required; I any adjourned hea	rings thereof;	ing of
<b>6.</b> ]	By agreement with the debtor(s), the above-disclosed fer Representation of the debtors in any dis- any other adversary proceeding.			es, relief from stay	actions or
		CERTIFICATION			
	certify that the foregoing is a complete statement of an ankruptcy proceeding.	y agreement or arrangement for p	payment to me for r	epresentation of the de	btor(s) in
J	ıly 8, 2019	/s/ William L. Fava			
Date		William L. Fava Signature of Attorney			
		Fava Firm			
		P.O. Box 783			
		Southaven, MS 38			
		662-536-1116 Fax wfava@favafirm.c			
		Name of law firm			

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### United States Bankruptcy Court Northern District of Mississippi

		Northern District of Mississippi		
In re	Tonya Michelle Terry		Case No.	
		Debtor(s)	Chapter	7
	VERII	FICATION OF CREDITOR N	<b>MATRIX</b>	
The abo	ove-named Debtor hereby verifies th	at the attached list of creditors is true and co	rrect to the best	of his/her knowledge.
Date:	July 8, 2019	/s/ Tonya Michelle Terry		
		Tonya Michelle Terry		

Signature of Debtor

American Anesthesiology of TN P.O. Box 88087 Chicago, IL 60680

American Express P.O. Box 981535 El Paso, TX 79980

Bank of America P.O. Box 650070 Dallas, TX 75265

Baptist P.O. Box 17127 Memphis, TN 38187-0127

Capital One P.O. Box 60599 City of Industry, CA 91716

Carrington Mortgage Services P.O. Box 5001 Westfield, IN 46074

Consolidated Recovery Systems Re: Methodist Healthcare P.O. Box 1719 Memphis, TN 38101

Credit One Bank
P.O. Box 98873
Las Vegas, NV 89193-8873

Dillard's P.O. Box 660553 Dallas, TX 75266

Discover Card P.O. Box 790213 Saint Louis, MO 63179

First Heritage Credit 8995 Hwy 51 N Southaven, MS 38671 First Premier Bank 3820 N Louise Ave Sioux Falls, SD 57107

JC Penney P.O. Box 965046 Orlando, FL 32896

Kay Jewelers
P.O. Box 3680
Akron, OH 44309-3680

LCA Collections Re: Lab Corp P.O. Box 2240 Burlington, NC 27216

Lowe's P.O. Box 965005 Orlando, FL 32896

Mariner Finance 1429 Goodman Rd, Suite 19 Horn Lake, MS 38637

MCSB, Inc. Re: Baptist Medical Group P.O. Box 1567 Paris, TN 38242

Merrick Bank P.O. Box 30537 Tampa, FL 33630

Methodist Healthcare P.O. Box 2279 Memphis, TN 38101-2279

Navy Federal Credit Union P.O. Box 3500 Merrifield, VA 22119

One Main Financial 8230 Camp Creek Blvd, Suite 105 Olive Branch, MS 38654 Path Group of the Mid-South 7550 Wolf River Blvd, Suite 200 Germantown, TN 38138

Pay Pal Credit P.O. Box 71202 Charlotte, NC 28272

Republic Bank & Trust Company d/b/a Elastic P.O. Box 950276 Louisville, KY 40295-0276

Revenue Assurance Re: Methodist Healthcare 2650 Thousand Oaks Blvd, Ste 4220 Memphis, TN 38118

Semmes-Murphey Clinic P.O. Box 1000, Dpt. 575 Memphis, TN 38148-0001

Synchrony Bank/Ashley Furniture P.O. Box 960061 Orlando, FL 32896

Target Card Services P.O. Box 673 Minneapolis, MN 55440

Victoria's Secret P.O. Box 659728 San Antonio, TX 78265

Wakefield & Associates Re: Path Group of the Mid South P.O. Box 59003 Knoxville, TN 37950

Wal-Mart/SYNCB P.O. Box 530927 Atlanta, GA 30353